

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

☐ CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED

Pages

AGREEMENT NUMBER

S0450001

REGISTRATION NUMBER

8380070440616.3

AMENDMENT NUMBER

2*Benefits***COPY**

1. This Agreement is entered into between the State Agency and Contractor named below:

STATE AGENCY'S NAME

Department of Personnel Administration

CONTRACTOR'S NAME

Managed Health Network (MHN)

2. The term of this

Agreement is July 1, 2004 through June 30, 2008

3. The maximum amount of this
- \$13,484,920.00**

Agreement after this amendment is: Thirteen Million, Four Hundred Eighty-Four Thousand, Nine Hundred Twenty Dollars and Zero Cents

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

Agreement S0450001 between the Department of Personnel Administration and Managed Health Network (MHN) reviewed and approved by DGS on July 2, 2004, and amended on September 14, 2006, is hereby further amended as attached, exercising its' option to extend the contract term one (1) year to June 30, 2008; and to add an additional \$3,835,000.00 to the amount of the existing contract.

The contract amount shall not exceed \$13,484,920.00.

The original agreement is hereby amended as attached:

Exhibit B1, Page 1, Fixed Monthly Per Employee Rate, shall be deleted and replaced.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR

CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)

Managed Health Network (MHN)

BY (Authorized Signature)



DATE SIGNED (Do not type)

6-11-07

PRINTED NAME AND TITLE OF PERSON SIGNING

Steve Sell, President and CEO

ADDRESS

503 Canal Boulevard
Pt. Richmond, CA 94804**STATE OF CALIFORNIA**

AGENCY NAME

Department of Personnel Administration

BY (Authorized Signature)



DATE SIGNED (Do not type)

6/22/07

PRINTED NAME AND TITLE OF PERSON SIGNING

David A. Gill, Director

ADDRESS

1515 S Street, North Building, Suite 400; Sacramento, CA 95814CALIFORNIA
Department of General Services
Use Only

**EXEMPT FROM DGS
REVIEW/APPROVAL
PCC 10295 (C) (4)**

☐ Exempt per:

EXHIBIT B
(Standard Agreement)

BUDGET DETAIL AND PAYMENT PROVISIONS

Exhibit B1, Fixed Monthly Per Employee Rate, page 1 of 1, shall now read:

Contract Year	Service Level 1	Service Level 2	Service Level 3
2007 / 2008	\$2.82	\$1.23	\$.81